

DECLARATION OF EMERGENCY

Department of Health and Hospitals Bureau of Health Services Financing

Early and Periodic Screening, Diagnosis and Treatment
Dental Program
(LAC 50:XV.6515 and Chapter 69)

The Department of Health and Hospitals, Bureau of Health Services Financing adopts LAC 50:XV.6515 and repeals Chapter 69 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act. This Emergency Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:953(B)(1) et seq., and shall be in effect for the maximum period allowed under the Act or until adoption of the final Rule, whichever occurs first.

Due to a continuing budgetary shortfall in state fiscal year 2011, the Department of Health and Hospitals, Bureau of Health Services Financing amended the provisions governing the reimbursement methodology for dental services in the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Program to further reduce the reimbursement rates (*Louisiana Register*, Volume 37, Number 6).

The department now proposes to amend the provisions governing the Early and Periodic Screening, Diagnosis and Treatment Program in order to remove the provisions governing dental services. The department will establish a dental benefits plan through a coordinated care network in order to provide dental services to all Medicaid recipients under the age of 21. This action is being taken to promote the public health and welfare of Medicaid recipients by ensuring continued access to better coordinated and quality dental care services. It is estimated that implementation of this Emergency Rule will be cost neutral to the Medicaid Program for state fiscal year 2012-2013.

Effective January 1, 2013, the Department of Health and Hospitals, Bureau of Health Services Financing amends the provisions governing the EPSDT Program in order to transition dental services to a coordinated care network dental benefits plan.

Title 50

PUBLIC HEALTH-MEDICAL ASSISTANCE

Part XV. Services for Special Populations

Subpart 5. Early and Periodic Screening, Diagnosis and Treatment

Chapter 65. General Provisions

§6515. Dental Services

A. Effective March 1, 2013, all Medicaid recipients under the age of 21 shall receive dental services through a coordinated care network dental benefits plan (CCN-DBP), pursuant to the provisions governing Coordinated Care Network Dental Benefits Plan, LAC 50:I.Chapter 29, as published in *Louisiana Register*, Volume 39, Number 1.

B. Any Medicaid recipient under the age of 21 that does not qualify for enrollment in the CCN-DBP shall receive coverage of dental services through the EPSDT Program, as with any other medically necessary Medicaid covered service.

C. Dental services covered in the EPSDT Program shall be reimbursed at the lower of either:

1. the dentist's billed charges minus any third party coverage; or

2. the state's established schedule of fees minus any third party coverage.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 39:

Chapter 69. Dental Services

§6901. General Provisions

A. – C. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 29:176 (February 2003), amended LR 33:1138 (June 2007), repealed by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 39:

§6903. Covered Services

A. – E. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 29:175 (February 2003), amended LR 30:252 (February 2004), LR 31:667 (March 2005), LR 33:1138 (June 2007), amended by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 35:1889 (September 2009), amended LR 37:1598 (June 2011), repealed LR 39:

§6905. Reimbursement

A. – H. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 33:1138 (June 2007), amended LR 34:1032 (June 2008), amended by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 35:1890 (September 2009), amended LR 36:2040 (September 2010), LR 37:1598 (June 2011), repealed LR 39:

Implementation of the provisions of this Rule may be contingent upon the approval of the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), if it is determined that submission to CMS for review and approval is required.

Interested persons may submit written comments to J. Ruth Kennedy, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821-9030. She is responsible for responding to inquiries regarding this Emergency Rule. A copy of this Emergency Rule is available for review by interested parties at parish Medicaid offices.

Bruce D. Greenstein
Secretary

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